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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

First Inventor

Title

Express Mail Label No.

Sherri Marie Carr

Inventor

J149-209-664.8

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-145019270 U.S. PTO
10/679309

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 4]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets _____]
5. Oath or Declaration [Total Sheets _____]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ Paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information:

Examiner _____

Art Unit: _____

For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS



Customer Number: _____

OR ☒ Correspondence address below

Name	Sherri Marie Carr				
Address	7744 Georgetown Chase				
City	Roswell	State	US	Zip Code	30075
Country	USA	Telephone	770.992.7482	Fax	770.992.7482

Name (Print/Type)	Sherri Marie Carr	Registration No. (Attorney/Agent)	
Signature	SMarie Carr	Date	10-1-03

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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16698 U.S. PTO
100703

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
385.00

Complete if Known

Application Number	
Filing Date	10-1-03
First Named Inventor	Sherris Marie Carr
Examiner Name	
Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number	
Deposit Account Name	

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	385
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$) <u>385</u>

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

(Complete (if applicable))

Name (Print/Type)	Sherris Marie Carr	Registration No. (Attorney/Agent)	Telephone	770 992 7482
Signature	SMarie Carr		Date	October 1, 2003

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PROVISIONAL APPLICATION FOR PATENT COVER SHEET

This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53(c).

Express Mail Label No. (UPS) J149.209.664.8

INVENTOR(S)					
Given Name (first and middle [if any])	Family Name or Surname	Residence (City and either State or Foreign Country)			
Sherri Marie	Carr	Roswell, GA			
Additional inventors are being named on the _____ separately numbered sheets attached hereto					
TITLE OF THE INVENTION (500 characters max)					
Automobile Day & Evening Light Sensory Detector for Interior Console					
Direct all correspondence to: CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number: 					
OR					
<input checked="" type="checkbox"/> Firm or Individual Name Sherri Marie Carr					
Address 7744 Georgetown Chase					
Address					
City	Roswell	State	GA	Zip	30075
Country	USA	Telephone	770 992 7482	Fax	770 992 7482
ENCLOSED APPLICATION PARTS (check all that apply)					
<input checked="" type="checkbox"/> Specification Number of Pages 4					
<input type="checkbox"/> Drawing(s) Number of Sheets _____ <input type="checkbox"/> CD(s), Number _____					
<input checked="" type="checkbox"/> Application Date Sheet. See 37 CFR 1.76 <input type="checkbox"/> Other (specify) _____					
METHOD OF PAYMENT OF FILING FEES FOR THIS PROVISIONAL APPLICATION FOR PATENT					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. FILING FEE Amount (\$)					
<input type="checkbox"/> A check or money order is enclosed to cover the filing fees. 385					
<input type="checkbox"/> The Director is hereby authorized to charge filing fees or credit any overpayment to Deposit Account Number: _____ 385					
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. 385					
The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government.					
<input checked="" type="checkbox"/> No. FILING FEE Amount (\$)					
<input type="checkbox"/> Yes, the name of the U.S. Government agency and the Government contract number are: _____ 385					

(Page 1 of 2)

Respectfully submitted,

SIGNATURE

Sherri Marie Carr

TYPED or PRINTED NAME

Sherri Marie Carr

TELEPHONE

770-992-7482

Date

10.1.03

REGISTRATION NO.

(if appropriate)

Docket Number:

USE ONLY FOR FILING A PROVISIONAL APPLICATION FOR PATENT

This collection of information is required by 37 CFR 1.51. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 8 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Provisional Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PROVISIONAL APPLICATION COVER SHEET
Additional Page

PTO/SB/16 (08-03)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Docket Number

INVENTOR(S)/APPLICANT(S)		
Given Name (first and middle [if any])	Family or Surname	Residence (City and either State or Foreign Country)
Sherri Marie	Carr	Roswell, GA

[Page 2 of 2]

Number _____ of _____

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Receipt of Documents for Sherri Marie Carr's Utility Patent Application
Automobile Day and Evening Light Sensory Detector for the Interior Console

<input type="checkbox"/>	<i>Specification Statement</i>	<i>4 pages</i>
<input type="checkbox"/> PTO-2038	<i>Credit Card Payment Form</i>	<i>1 page</i>
<input type="checkbox"/> PTO/SB/17	<i>Fee Transmittal for FY 2004</i>	<i>1 page</i>
<input type="checkbox"/> PTO/SB/01	<i>Declaration: Utility Patent Application</i>	<i>2 pages</i>
<input type="checkbox"/> PTO/SB/01A	<i>Declaration: ...Data Sheet</i>	<i>1 page</i>
<input type="checkbox"/> PTO/SB/04	<i>Supplemental Declaration</i>	<i>2 pages</i>
<input type="checkbox"/> PTO/SB/05	<i>Utility Patent Application Transmittal</i>	<i>1 page</i>
<input type="checkbox"/> PTO/SB/06	<i>Patent App Fee Determination Record</i>	<i>1 page</i>
<input type="checkbox"/> PTO/SB/08a	<i>Information Disclosure Statement</i>	<i>1 page</i>
<input type="checkbox"/> PTO/SB/08b	<i>Information Disclosure Statement</i>	<i>1 page</i>
<input type="checkbox"/> PTO/SB/16	<i>Provisional App. Cover Sheet</i>	<i>2 pages</i>